2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 05, 2008
Secretary of State

DOCUMENT# P02000042377

Entity Name: CAMOVER INTERNATIONAL GROUP CO.

Current Principal Place of Business:

14312 SW 103 TER
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

14312 SW 103 TER
MIAMI, FL 33186

New Mailing Address:

PO BOX 166335
MIAMI, FL 331166335 US

FEI Number: 22-3859367 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ALVAREZ, CARLOS A MR
14312 SW 103 TER
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ALVAREZ, MONICA E MRS
Address: 14312 SW 103 TER
City-St-Zip: MIAMI, FL 33186

Title: CEO ( ) Delete
Name: ALVAREZ, CARLOS A MR
Address: 14312 SE 103 TER
City-St-Zip: MIAMI, FL 33186

Title: VPD (X) Delete
Name: ALVAREZ, LIVIA M MS
Address: 14312 SE 103 TER
City-St-Zip: MIAMI, FL 33186

Title: VPD (X) Delete
Name: REVOREDO, LUIS J MR
Address: 14312 SW 103 TER
City-St-Zip: MIAMI, FL 33186

Title: VPD (X) Delete
Name: AGUIRRE, HECTOR R MR
Address: 14312 SW 103 TER
City-St-Zip: MIAMI, FL 33186

Title: VPD (X) Delete
Name: TALLEDO, CESAR MR
Address: 14312 SW 103 TER
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ALVAREZ, CARLOS A MR
Address: PO BOX 166335
City-St-Zip: MIAMI, FL 331166335

Title: VP (X) Change ( ) Addition
Name: ALVAREZ, MONICA E MRS
Address: PO BOX 166335
City-St-Zip: MIAMI, FL 331166335 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARLOS ALVAREZ P 08/05/2008

Electronic Signature of Signing Officer or Director — Date